Application Number Filing Date CLAIMS ONLY Applicant(s) * May be used for additional claims or amendments CLAIMS . AS FILED AFTER FIRST AMENDMENT AFTER SECOND AMENDMENT Depend Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend 51 · 52 · 53 · 54 · 55 · 56 13 66 18 21 22 73 74 75 76 ·26 27 30 31 80 82 34 84 36 · 37 38 40 91 - 41 48 ·49 50

Total Indep

Total Depend

Total Claims

Total Indep Total

Depend

Total